

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

ATTORNEY DOCKET NO. 0378-0387P

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the inventor and the inventor are solded.

•	(if plural inventors are named below	of the subject matter which is cla	e inventor is named below) or an ori	ginal, first and joint invento				
Insert Title:	FLEXIBLY DESIG	GNABLE KEYBOARD	AND A METHOD OF P	RODUCING THE				
	the specification of which is attached			SAME				
Fill in Appropriate	the specification was filed of	on						
Information — For Use	United States Application N	umber		as				
Without	and amended on		(if ap	;				
Specification	T THE THE THE TIME OF	H						
Attached:	The manonal Application is	umper						
þå	amended under PCT Article 1	9 on		(if anniantle)				
				— (11 applicable)				
13 17			above identified specification, includ					
þ.d.	§1.56.	e information which is material to p	atentability as defined in Title 37, Co	de of Federal Regulations,				
	I do not know and do not believe thereof, or patented or described in a prior to this application, that the same application, that the invention has no application in any country foreign to t more than twelve months (six months on this invention has been filed in an representatives or assigns, except as for	the same was ever known or use ny printed publication in any coun was not in public use or on sale in the been patented or made the subjuble United States of America on an for designs) prior to this application y country foreign to the United States	d in the United States of America be try before my or our invention there the United States of America more ect of an inventor's certificate issue application filed by me or my legal ion, and that no application for pater tates of America prior to this applic	efore my or our invention cof or more than one year than one year prior to this ed before the date of this representatives or assigns at or inventor's certificate eation by me or my legal				
	filing date before that of the application	n on which priority is claimed:	Code, §119 (a)-(d) of any foreign a reign application for patent or inver	oplication(s) for patent or ator's certificate having a				
ful Insert Priority	Prior Foreign Application(s)			Priority Claims 1				
Information:	2001-14415	Japan	January 23, 200	Priority Claimed				
(if appropriate)	(Number)	(Country)	(Month / Day / Year Filed)	01 K				
			(
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No				
	(Number)		·					
	(Number)	(Country)	(Month / Day / Year Filed)	— ∐ □ Yes No				
	(Number)	(Country)	_					
	,,	(Country)	(Month / Day / Year Filed)	Yes No				
Insert Provisional Application(s):	I hereby claim the benefit under Title 3:	5, United States Code, §119(e) of a	nny United States provisional applica	tion(s) listed below. (Filing Date)				
		(Application Number)						
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:							
	the Filing Date of This Application:	raise of inventor's certificate r	ned More than 12 Months (6 Month	is for Designs) Prior to				
Insert Requested Information: (if appropriate)	Country	Application Numb	Date of Filing (Mon	nth / Day / Year)				
Insert Prior U.S.	I hereby claim the benefit under Title 35 insofar as the subject matter of each of the in the manner provided by the first parawhich is material to patentability as defin date of the prior application and the national states of the prior application and the states of the states of the	graph of Title 35, United States C	ode, §112, I acknowledge the duty t	and/or PCT application				
Application(s): → (if any)	(Application Number)	(Filing Date)	(Status — patented,	pending, abandoned)				
Dec. 1 - 60	(Application Number)			·				
Page 1 of 2	((Filing Date)	(Status — patented,)	pending, abandoned)				

XP-112 US ATTORNEY DOCKET NO.

I hereby appoint the following attorneys to prosecute this application and so in international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assigned provides said attention with a patent and in the patent of the attorneys identified below, unless the inventor(s) or assigned provides said attention with a patent of the attorneys identified below, unless that the patent of the attorneys identified below, unless that the patent of the attorneys identified below. the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Raymond C. Stewart Joseph A. Kolasch Bernard L. Sweeney Charles Gorenstein Leonard R. Svensson Andrew D. Meikle Joe McKinney Muncy Donald J. Daley	(Reg. No. 21,066) (Reg. No. 22,463) (Reg. No. 24,448) (Reg. No. 29,271) (Reg. No. 30,330) (Reg. No. 32,868) (Reg. No. 32,334) (Reg. No. 34,313)	Terrell C. Birch James M. Slattery Michael K Mutter Gerald M. Murphy, Jr Terry L. Clark Marc S. Weiner John A. Castellano	(Reg. No. 32,644) (Reg. No. 32,181) (Reg. No. 35,094)
2 ondid 3. Datey	(Reg. No. 34,313)	John W. Bailey	(Reg. No. 32 881)

Send Correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or Customer No. 2292 P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under So

	GIVENNAME	FAMILYNAME				
Sole Inventor. Insert Name of Inventor Insert Date This	Hiroaki Oik	awa	INVENTOR'S SIGNATURE	E BB	DATE* Januar	
Document is Signed	Residence (City, State & Country	ry)		CITIZENSHI	12, 20	
Insert Residence	IChikawa-shi Chiha Tanan			nese		
Thesent Post Office	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)					
Address →	c/o Elcom C	orporation				
Full Name of Second	3-18, Tomihama 3-chome, Ichikawa-shi, Chiba, Japan					
::-Inventor, if any: ::	GIVEN NAME	FAMILYNAME	INVENTOR'S SIGNATURE		DATE*	
	Residence (City, State & Country	1)		COTTON IOU IIIO		
<u>U</u>				CTTIZENSHIP		
3	POST OFFICE ADDRESS (Compl	ete Street Address including	City State & Co.			
		oto otrocer tadress mendan ig	city, state & Country)			
		·				
ull Name of Third Inventor, if any	GIVEN NAME	FAMILYNAME	INVENTOR'S SIGNATURE			
see above		TO STREET TO STREET	INVENTORSSIGNATURE		DATE*	
	Residence (City, State & Country)					
	rissidence (city, state & Country)			CITIZENSHIP		
	POST OFFICE ADDRESS (S					
	POST OFFICE ADDRESS (Comple	te Street Address including	City, State & Country)			
	POST OFFICE ADDRESS (Comple	te Street Address including	City, State & Country)			
		te Street Address including	City, State & Country)			
	POST OFFICE ADDRESS (Comple	te Street Address including	City, State & Country) INVENTOR'S SIGNATURE		DATE*	
nventor, if any					DATE*	
inventor, if any				CITIZENSHIP	DATE*	
nventor, if any	GIVEN NAME			CTIZENSHIP	DATE*	
nventor, if any	GIVEN NAME Residence (City, State & Country)	FAMILYNAME	INVENTOR'S SIGNATURE	CITIZENSHIP	DATE*	
Il Name of Fourth inventor, if any see above	GIVEN NAME	FAMILYNAME	INVENTOR'S SIGNATURE	CTTIZENSHIP	DATE*	
inventor, if any see above	GIVEN NAME Residence (City, State & Country)	FAMILYNAME	INVENTOR'S SIGNATURE	CTIZENSHIP	DATE*	
nventor, if any see above Name of Fifth ventor, if any	GIVEN NAME Residence (City, State & Country)	FAMILYNAME	INVENTOR'S SIGNATURE	CTIZENSHIP		
nventor, if any	GIVEN NAME Residence (City, State & Country) POST OFFICE ADDRESS (Complete	FAMILY NAME e Street Address including C	INVENTOR'S SIGNATURE Sity, State & Country)	CITIZENSHIP	DATE*	
nventor, if any see above Name of Fifth ventor, if any	GIVEN NAME Residence (City, State & Country) POST OFFICE ADDRESS (Complete	FAMILY NAME e Street Address including C	INVENTOR'S SIGNATURE Sity, State & Country)			
ventor, if any see above Name of Fifth rentor, if any	GIVEN NAME Residence (City, State & Country) POST OFFICE ADDRESS (Complete GIVEN NAME	FAMILY NAME e Street Address including C	INVENTOR'S SIGNATURE Sity, State & Country)	CTIZENSHIP		
nventor, if any see above Name of Fifth ventor, if any see above	GIVEN NAME Residence (City, State & Country) POST OFFICE ADDRESS (Complete GIVEN NAME Residence (City, State & Country)	FAMILY NAME e Street Address including C	INVENTOR'S SIGNATURE Tity, State & Country) INVENTOR'S SIGNATURE			
ventor, if any see above . Name of Fifth ventor, if any see above	GIVEN NAME Residence (City, State & Country) POST OFFICE ADDRESS (Complete GIVEN NAME	FAMILY NAME e Street Address including C	INVENTOR'S SIGNATURE Tity, State & Country) INVENTOR'S SIGNATURE			